

**CITY OF ATLANTA**  
**APPLICATION FOR 2003 OUTDOOR FESTIVAL PERMIT**

**(Must be submitted at least 90 days prior to the event)**

Date Application Submitted: \_\_\_\_\_

**1. Festival Information**

a. Name of Festival: \_\_\_\_\_

b. Purpose of Festival (Describe all activities planned for the event. Attach additional sheets as needed):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. How will you publicize the event? \_\_\_\_\_

d. What is the general target area of your advertisements? (Attach copy of publicity plan, flyer, etc.)

\_\_\_\_\_

\_\_\_\_\_

**2. Festival Organizers/Sponsors**

a. Name of applicant organization: \_\_\_\_\_

Complete address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

b. Applicant Contact Person:

Complete address (if different from above): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

c. Sponsors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**3. Festival Date:** \_\_\_\_\_

Festival hours (daily): \_\_\_\_\_

Setup time (first item to arrive on site): \_\_\_\_\_

Takedown time (last item to be removed): \_\_\_\_\_

Rain date for the event (if any): \_\_\_\_\_

#### 4. Indicate the type of festival

\_\_\_\_\_ **Commercial** – Any part of the net earnings of the outdoor festival inures to the benefit of any private shareholder, individual or for-profit corporation, as such term is defined by the Official Code

\_\_\_\_\_ **Non-Commercial** – Any festival organized and operated for charitable, religious, scientific, literary or educational purposes, or for the prevention of cruelty to children or animals, or where no part of the net earnings of which inures to the benefit of any private shareholder, individual or for-profit corporation, as such is defined by the Official Code of Georgia.

#### 5. Festival Location (Please list park name and address, if known)

a. Park name \_\_\_\_\_

b. Street address \_\_\_\_\_

c. Other descriptive information about location \_\_\_\_\_

d. If required, has permission been granted for use of festival location by entity other than the City of Atlanta? Yes \_\_\_\_\_ No \_\_\_\_\_

e. If yes, please attach proof of authorization.

#### 6. Attendance

a. Number of persons expected to attend this event: \_\_\_\_\_

b. Describe parking areas and available transportation modes to and from the event.

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#### 7. Site Plan - Please attach a detailed site plan showing in clear detail the following information:

a. Layout of the festival area

- b. Identify the festival production area in detail
- c. Specify the boundaries of the overall festival assembly area (in accordance with §138-187)
- d. Include the location of portable toilets to be provided and show the number of such toilets at each location.
  - i. Please be aware, a permit is required for non-sewered toilets. The Fulton County Health Department will determine the minimum number of portable toilets required for your event (contact FCHD for the correct number); however, the City of Atlanta reserves the right to require a greater number, based on evaluation of this site plan by the Chief of Special Operations of the Atlanta Fire Department.
  - ii. How many toilets will be provided? \_\_\_\_\_
  - iii. How many toilets will be provided for persons with disabilities? \_\_\_\_\_

**8. Street Closings** - List any and all possible streets to be closed. Include day, date and time of closings and time to reopen:

<u>Streets to be closed</u>	<u>Day/Date</u>	<u>Closing Time</u>	<u>Opening Time</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**9. Alcohol** - Will alcoholic beverages be made available to the public? Yes \_\_\_\_ No \_\_\_\_  
If yes, provide the following detailed information:

a. What type of alcohol will be made available?

(1) Spirituous Liquor \_\_\_\_ (2) Beer \_\_\_\_ (3) Wine \_\_\_\_

b. List the exact locations and times for alcohol sales:

<u>Location</u>	<u>Time</u>
_____	_____
_____	_____

c. Have City and State permits been applied for and/or obtained? Yes \_\_\_\_ No \_\_\_\_

d. Do the alcohol vendors presently hold a license for on-premises consumption? Yes \_\_\_\_ No \_\_\_\_

<u>Name of Licensee</u>	<u>Address</u>	<u>Telephone</u>
_____	_____	_____
_____	_____	_____

e. If alcohol will be sold or given away and the vendor is not a license holder for on site consumption, list the person(s) who will apply for the alcoholic beverage license. (To apply for an alcohol permit, call APD Licenses and Permits at 404-853-4470.)

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
_____	_____	_____

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- f. The applicant agrees that all alcohol sales at the festival will cease no later than one hour before the scheduled end of each day of the festival. Yes \_\_\_\_\_ No \_\_\_\_\_

### 10. Temporary Structures

- a. Will any temporary structures be built? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, describe in detail and include location(s). *An engineer's stamp, seal and signature are required for stage plans.*

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- b. Will any stage(s) be constructed and utilized? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, how many? Please indicate their locations on the site plan.

### 11. Signage - Will any signs or pennants be hung? Describe the proposed location(s):

### 12. Parades - Is there a parade planned with this event? Yes \_\_\_\_\_ No \_\_\_\_\_

- a. If yes, please state the day, time, location and anticipated number of participants:

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- b. Have you obtained a parade permit from the Special Operations Section of the Atlanta Police Department? Yes \_\_\_\_\_ No \_\_\_\_\_

### 13. Entertainment

- a. Will there be any entertainment or music? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. If yes, what time will the performances take place? From \_\_\_\_\_ Until \_\_\_\_\_
- c. Is a fireworks display planned in conjunction with this event? Yes \_\_\_\_\_ No \_\_\_\_\_

### 14. Street Vendors - Are any street vendors being considered? Yes \_\_\_\_\_ No \_\_\_\_\_

- a. If yes, please detail on a separate sheet the number involved, and indicate whether the vendors are specifically contracted or regularly licensed.
- b. Please indicate the location of vendors on the site plan.

### 15. Cleanup of festival area

- a. How do you plan to remove garbage? List names and numbers of cleanup committee.

Name

Telephone

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b. What are your plans for recycling refuse? Describe in detail. \_\_\_\_\_

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c. If using a private sanitation company, give name, contact person, and telephone:

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d. Will additional trash receptacles need to be placed in the festival area? Contact the City Sanitation Department to determine number of receptacles needed. If this service is used, payment is due 5 days before the event.

e. How many trash receptacles are needed? \_\_\_\_\_

**16. Emergency Medical Services** – Has an EMS plan (for events of 5,000 people or more) been approved by the Special Operations Section of the Atlanta Fire Department?

Yes \_\_\_\_\_ No \_\_\_\_\_

a. If no, you must have an EMS plan approved by the Chief of Special Operations of the Atlanta Fire Department. (An EMS Plan form is included in this package.) An EMS Plan must be approved in order to receive an Outdoor Festival Permit for the event.

b. If yes, please attach appropriate documentation.

**17. Security Plan** - Has the Special Operations Section of the Atlanta Police Department approved a security plan? Yes \_\_\_\_\_ No \_\_\_\_\_ The plan shall specify:

- The number of POST-certified off-duty law enforcement personnel and private security guards which the applicant plans to hire (where the number of off-duty law enforcement personnel shall be the same or more than the number of private security guards);
- The arrangements the applicant has made for hiring them;
- Details of the plan for payment.

a. If no, you must engage qualified security consultants to provide the Specials Operations Section of the Atlanta Police Department with a security plan for approval. (A Security Plan Form is included in this package.) A security plan must be approved in order to receive an Outdoor Festival Permit for the event.

b. If yes, please attach appropriate documentation.

c. Please indicate in which Atlanta Police Department Zone the event being held:  
Zone \_\_\_\_\_

**18. Utility services required**

**Electricity:**

a. Describe specific electrical power needs: Will a generator be used for your event?

Yes \_\_\_\_\_ No \_\_\_\_\_

b. Will additional electrical wiring need to be installed? Yes \_\_\_\_\_ No \_\_\_\_\_

c. Who is your Electrician? Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Water:**

d. Describe specific water needs: \_\_\_\_\_  
\_\_\_\_\_

**19. Admission** - Does the applicant intend to gate the festival and charge an admission fee?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please detail the amount of the fee and details as to how the festival will be gated.

\_\_\_\_\_  
\_\_\_\_\_

**20. City Council Notification** - Please certify that a Notice of Intent to Hold a Festival (with a copy of this completed application) will be sent via registered mail or by hand delivery to all City Council members for areas affected by the festival.

a. What Council District(s) is this event being held in? \_\_\_\_\_

b. Who is the Council member? \_\_\_\_\_

**21. NPU Notification** - Please certify that a Notice of Intent to Hold a Festival (with a copy of this completed application) will be sent via registered mail or by hand delivery to all Neighborhood Planning Units for areas affected by the festival.

a. Which NPU is affected: \_\_\_\_\_ (Please refer to Special Events Package)

b. What is their response? Yes \_\_\_\_\_ No \_\_\_\_\_

c. Please attach a copy of correspondence sent to the NPU Chair about the upcoming event as well as the completed NPU Review Form and other correspondence.

**22. Prior Events**

a. Is this a first time event? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Has this event occurred five (5) or more times in the preceding years? If yes, please list the years. \_\_\_\_\_

c. What was the attendance for the most recent event? \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

## **REVIEW YOUR APPLICATION PRIOR TO SUBMITTAL**

**Please fill out the application completely. All applications are considered new and "same as last year" is not an appropriate answer. Please note that the application will be returned, unprocessed, if not filled out completely.**

**A complete application includes the required site plan and security plans described herein. Site plan may be drawn in any format.**

**If desired, applicants may obtain park blueprints by completing the application on the following page and submitting it to the Park Design office using the contact information included on the form. Cashiers' checks, money orders or cash will be accepted as payment for the blueprints.**

**When returning the application, please include separate payments for application fee, permit fee and supplemental user fee. All payments must be in the form of a cashier's check or money order payable to the City of Atlanta. No personal checks will be accepted. (Refer to the rules and regulations in the 2003 Outdoor Special Events Package to determine appropriate fees.) Attach a detailed site plan on regular (8 1/2" X 11") sized paper; however, a larger format may also be submitted as a supplement. Forms are provided in the application package.**

City of Atlanta  
Department of Parks, Recreation and Cultural Affairs

**OFFICE OF PARK DESIGN**

City Hall East, 8<sup>th</sup> Floor  
675 Ponce de Leon Avenue NE  
Atlanta, Georgia 30308  
404-817-6740  
Fax 404-817-6741

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**REQUEST FOR PARK BLUE PRINT**

Name of requester: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Reason Needed: *For special event site plan*

Date Needed: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Cost to Requester:**

\$ 5.00 each – Small map (8-1/2" x 11" or 11" x 17")

\$ 10.00 each – Large map (Any size larger than 11" x 17")

Name of map(s) sold:      Number and size of map(s) sold:

\_\_\_\_\_

\_\_\_\_\_

Amount Received: \_\_\_\_\_

Received by: \_\_\_\_\_



**CITY OF ATLANTA  
2003 OUTDOOR FESTIVAL FEES**

**COMMERCIAL**

<b>Class</b>	<b>Anticipated Attendance</b>	<b>Application Fee</b>	<b>Permit Fee</b>
A	50,000	\$150	\$15,000
B	20,000-49,999	\$150	\$8,000
C	10,000-19,999	\$100	\$5,000
D	2,000-9,999	\$100	\$2,500
E	250-1,999	\$100	\$500

**NON-COMMERCIAL**

<b>Class</b>	<b>Anticipated Attendance</b>	<b>Application Fee</b>	<b>Permit Fee</b>
A	50,000	\$100	\$9,000
B	20,000-49,999	\$100	\$3,000
C	10,000-19,999	\$50	\$1,500
D	2,000-9,999	\$50	\$750
E	250-1,999	\$50	\$250

# NPU REVIEW FORM

Name of the Festival \_\_\_\_\_

Festival Organizer: \_\_\_\_\_

First Time Festival:      Yes      No      \_\_\_\_\_

Festival Date and Hours: \_\_\_\_\_

Location of Festival: \_\_\_\_\_

NPU and Meeting Date: \_\_\_\_\_

NPU Response:      Yea      Nay      \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SPECIAL EVENT  
EMERGENCY MEDICAL SERVICE PLAN**

**NAME OF THE EVENT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**DATE/DAYS OF THE EVENT/FESTIVAL** \_\_\_\_\_

**Location of the Event/Festival** \_\_\_\_\_

**Event/Festival Hours** \_\_\_\_\_

**Name of Organization** \_\_\_\_\_

**Address** \_\_\_\_\_

**Name of Contact Person** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_

**Attendance Est.** \_\_\_\_\_ **Alcohol Served** \_\_\_ **Yes** \_\_\_ **No**

**List All Street Closing** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**What are your plans for Emergency Medical Services/Public Safety?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Do you want Atlanta Fire Department/ Special Operations Section to design your  
Emergency Medical Service Plan?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No.** If yes please notify us at  
404-624-0658 telephone 404-624-0663 fax.

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**Medical Director of Emergency Services**

**Providing Event Coverage**

**Approved** \_\_\_\_\_ **Disapproved** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**Chief of Special Operations Section**

**Atlanta Fire Department**

**Approved** \_\_\_\_\_ **Disapproved** \_\_\_\_\_

**Atlanta Police Department**  
**Special Operations Section**  
**Special Events**  
**Security Plan**

Application No. \_\_\_\_\_

Date: \_\_\_\_\_

Event Type: \_\_\_\_\_

☐ Bicycle Race

☐ Foot Race

☐ Street Closing

☐ Motorcade

☐ Parade

☐ Walk / March

☐ Lane Closing

☐ Festival

☐ Rally

Zone: \_\_\_\_\_

Description of Event: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location (s) / Route:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Security Plan Summary: (Attach Plan of Action)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Number of Officers Required:** \_\_\_\_\_ **(Off-duty only) List agency /**  
**agencies represented by Off duty Officers:** \_\_\_\_\_

Traffic: Fixed: \_\_\_\_\_ Mobile: \_\_\_\_\_

Security: Fixed: \_\_\_\_\_ Mobile: \_\_\_\_\_

Number of Barricades Required: \_\_\_\_\_ **(Applicant must provide barricades)**

Security Coordinator: \_\_\_\_\_ Telephone: \_\_\_\_\_

Approval:

Commander App. ☐ \_\_\_\_\_ Date: \_\_\_\_\_

Special Operations Section Not App. ☐

Deputy Chief App. ☐ \_\_\_\_\_ Date: \_\_\_\_\_

Field Operations Not App. ☐

***THIS FORM IS TO BE FILLED OUT BY THE FESTIVAL ORGANIZER OR  
PROMOTER ONLY. ATLANTA POLICE OFFICERS ARE PROHIBITED BY CITY  
ORDINANCE FROM SIGNING THIS FORM AS SECURITY COORDINATOR.***